



Michaela I. Fissel
Windsor, CT

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SB 750 AN ACT CONCERNING THE PREVENTION AND TREATMENT OF MENTAL ILLNESS AT INSTITUTIONS OF HIGHER EDUCATION.

Dear Senator Haskell, Representative Haddad, and Respective Members of the Joint Committee of Higher Education and Employment Advancement,

My name is Michaela I. Fissel. I am a registered voter and resident of Windsor, Connecticut.

I am testifying in support of Senate Bill 750: AN ACT CONCERNING THE PREVENTION AND TREATMENT OF MENTAL ILLNESS AT INSTITUTIONS OF HIGHER EDUCATION, which would require institutions of higher education to establish programs for the prevention and treatment of mental illness for undergraduate and graduate students.

You will hear testimonials today that cite the rising rate of “mental illness” among college students, and the need for greater access to counseling and treatment across campuses. You will hear testimonial that is absolutely heart wrenching as young people fall through the cracks our educational institutions – their planned program of studies and predicted life trajectories forever altered.

It is undeniable that young people are struggling on college campuses across the United States. Last year, nearly 70% of college students reported feeling very sad, 65% overwhelming anxiety, and 43% felt overwhelming anger.¹ Although some may receive a psychiatric diagnosis, labeled as a “mental illness” in this legislation, there are a larger portion of young people who experience distress to a degree that does not meet criteria for clinical intervention – nor should it

Reported by the American College Health Association, 30% of college students who reported a mental health diagnosis in the past year.¹ While it was reported, in 2015 by the Center for Collegiate Mental Health, the number of students seeking support through college counseling centers increased by about 30% since 2006, despite enrolment increasing by only 6%.²

Each of these statistics support the underlying premise for the current legislation. Even more so with consideration for the reported rate of 13% of college students seriously considering suicide.¹

As a person who is in recovery from mental health and addiction challenges, and a community based researcher with an expertise specific to emerging adults as a behavioral health service population - I can assure you that there is absolutely a need for greater availability of supportive resources on college campuses. However, I challenge you to use this bill to reframe the dialogue and humanize the experience of emotional distress.

There is a misconception that emotional distress must be prevented and treated. That sadness, fear, distrust, anger, and other emotions experienced by young people are a sign of a “mental illness”. As a trainer for Mental Health First Aid since 2011, I can attest to this propaganda and I challenge the current convention upheld within the title of this bill.

¹ American College Health Association. American College Health Association-National College Health Assessment II: Undergraduate Student Reference Group Executive Summary Spring 2018. Silver Spring, MD: American College Health Association; 2018.

² Center for Collegiate Mental Health. (2016, January). 2015 Annual Report (Publication No. STA 15-108).

In my experience, I am a successful college graduate as a result of a non-traditional approach to supporting students who experience mental health and addiction challenges. It was not until I engaged in meaningful dialogue about my experiences and found meaning in the struggle that I began to form an identity beyond my suffering.

Despite having an honorable GPA, achieving numerous recognitions and awards, I didn't feel capable of managing the stress that I felt. I encourage you to consider including in this legislation reference for prevention to include presentations by people in recovery from mental health and addiction challenges, mandatory social emotional learning experiences that include stress-mitigation techniques for incoming students, and the reinstatement and expansion of Supported Education across all ConnSCU campuses.

Thankfully, I have been successful in navigating higher education, in spite of my experiences with mental health challenges, and yet I had access to resources beyond those promoted by psychiatry, traditional treatment, and insurance.

Today, I have three children, I am elected member of my local Board of Education, and I am the Assistant Executive Director at Advocacy Unlimited, Inc. Recovery is not only possible once we see our self beyond the limitations imposed upon us by a psychiatric diagnosis – it should be the belief held by those with decision making authority.

Thank you for your time. If you have any questions regarding my testimony, please reach out to me at mfissel@advocacyunlimited.